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maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying		
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KNOBBE MAI 2040 MAIN STR FOURTEENTH	RTENS OLSON ( EET FLOOR	v2008 & BEAR LLP		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)		
IRVINE, CA 926	514					
						(Signature)
			,			(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/564,510	10/564,510 01/12/2006		Yasuo Masuda		SHIGA7.036APC	8841
TITLE OF INVENTION:	POSITIVE PHOTORE	SIST COMPOSITION A	METHOU OF FORM	ING RESIST PATT	EKN	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/24/2008
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
CHU, JOHN S Y		1795	430-190000			
<ol> <li>Change of correspondence address or indication of "Fee Address' CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Knobbe, Martens,  Olson, & Bear LLP			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Tokyo Ohka Kogyo Co., Ltd.  Kawasaki-shi, Japan						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🖵 Government						
4a. The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 111410 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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interest as shown by the re	ecords of the United Sta	tes Patent and Trademark	Office.	.11	, , , , , , , , , , , , , , , , , , , ,	he assignee or other party in
Authorized Signature _	ffMX V	<u> </u>	<del></del>	Date Octo	ber 31, 2008	
Typed or printed name Neil 6. Bartfeld			Registration No39,901			
Alexandria, Virginia 2231	rginia 22313-1450. DC 3-1450.	NOT SEND FEES OR	COMPLETED FORMS IT	J THIS ADDRESS.	ne public which is to file (an inutes to complete, including mments on the amount of the trademark Office, U.S. Dep. SEND TO: Commissioner isplays a valid OMB control.	d by the USPTO to process) ng gathering, preparing, and me you require to complete sartment of Commerce, P.O. for Patents, P.O. Box 1450,